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Please type a plus sign (+) inside this box->/ + Total Page_ Atty Doc. No. 51162 30 UTILITY PATENT APPLICATION FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER TRANSMITTAL Maximilian ANGEL Express Mail Label No. Application Elements Address To: Assistant Commissioner for Patents

Box Patent Application Washington, D.C. 20231

1. / X / Fee transmittal Form (Submit an original, and a duplicate for fee processing)
2./X/Specification
Total Pages/

(Preferred arrangement set for below) Descriptive title of the Invention

Cross References to Related Application Statement Regarding Fed. Sponsored R & D Reference to Microfiche Appendix

Background of the Invention Brief Summary of the Invention

Brief Description of the Drawings (if filed)

Detailed Description

Claim(s)

Abstract of the Disclosure

3./ / Drawing(s)(35 USC 113)(Figs.) Total Sheets / / 4./ X /Oath or Declaration Total Pages/3/

a / X/ Newly executed (original or copy)

Signed statement attached deleting inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b).

5. / / Incorporation by reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6./	/ Microfiche	Computer	Program	(Appendix)
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/Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

/ Computer Readable Copy

/ Paper Copy (Identical to computer copy)

/ Statement verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

8./ X / Assignment Papers (cover sheet & document(s)

9/ / 37 CFR 3.73(b)Statement / /Power of Attorney

10./ /English Translation Document (if applicable)

11./ /Information Disclosure / / Copies of IDS Citations

12./ X /Preliminary Amendment

13./ x/Return Receipt Postcard (MPEP 503)

Should be specifically itemized)
14./ /Small Entity / /Statement filed in prior application
Statements Status still proper and desired
15.//Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16./	/ Other	 	

17. If a Continuing Application, check appropriate box and supply the requisite information:

/ /Continuation / /Divisional / / Continuation-in part (CIP) of prior application No.

CORRESPONDENCE ADDRESS

/ Customer Number or Bar code Label

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Insert Customer No. or Attach bar code label here

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The filing fee has been calculated as shown below:

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Basic Fee	• • • • • • • • • •	• • • • • • • • • • •		\$ 710.00
Total Claims:		= x	\$09./\$18. =	
Indep. Claims:		= x	\$40./\$80. =	
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- [X] A check for \$750.00 for the filing fee and assignment recordation.
- [X] The Commissioner is hereby authorized to charge any other fee required, including the issue fee, in connection with the filing and prosecution of this application, and to the extent necessary, applicant(s) hereby petition for extension(s)of time under 37 CFR 1.136, to be charged to our Deposit Account 11-0345.

Respectfully submitted,

KEIL & WEINKAUF

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